

Email sent to Medi-Cal Managed Care Plan Medical Directors from the California Department of Health Care Services
August 30, 2019

To: Medi-Cal Managed Care Plan Medical Directors, QI staff

Subject line: Use the new HEDIS prenatal immunization measure to help protect pregnant women and their newborns

We need your help to prevent infant deaths and hospitalizations from whooping cough (pertussis), and protect pregnant women and their newborns from influenza. Prenatal immunization levels are significantly lower in women with Medi-Cal compared to privately insured,^[1] and we now have some new tools to help you address this disparity. Here are three steps your Plan can take:

1. Run the **new HEDIS Prenatal immunization status (PRS)** measure on a cohort of your pregnant members to assess your Plan's baseline performance. Please let me (sarah.royce@cdph.ca.gov) know if you calculate this measure, so we can collect and contribute CA's experience to the national assessment of this new measure.
2. Focus quality improvement efforts^[2] to raise prenatal immunization coverage across providers in your network, using your baseline immunization levels. Tailor and send the attached announcement to all prenatal care providers in your network.
 - a. Reward prenatal care providers who immunize on site in their clinic, since this works best.^[3] Promote the new **Value Based Payment (VBP)**^[4] incentive payments for prenatal Tdap
 - b. Assist prenatal providers who don't yet immunize on site
 - Find out about **FREE prenatal Tdap starter doses** from the State by contacting the immunization coordinator of your [local jurisdiction](#) or Rebeca.Boyte@cdph.ca.gov
 - Remind providers to make a [strong referral](#) to an in-network pharmacy and follow up to ensure vaccination occurred (for Tdap, as early as possible between 27 and 36 weeks gestation, and for flu vaccination, any time during pregnancy).
 - c. Include information on immunization, like this [pamphlet](#), in your communications and outreach to pregnant members
3. Notify NCQA by Feb 2020 that your Plan intends to submit PRS results for deliveries from 2019.^[5]

Please let me (sarah.royce@cdph.ca.gov) and [your local health department](#) know which steps your Plan can take this year, and feel free to contact us to share lessons learned and/or for help addressing barriers.

Thank you for your work protecting California's pregnant women and infants.

¹ [MIHA](#)

² For examples of QI interventions, see [prenatal Tdap toolkit](#). For examples of Plan interventions, see: <http://www.partnershiphp.org/Providers/Quality/Pages/Perinatal-QIP-2018-19.aspx>

<http://www.immunizeca.org/wp-content/uploads/2018/04/Immunization-in-pregnancy-Robert-Moore-PHC.pdf>

<http://www.acphd.org/media/540904/best-practices-la-clinica-advice.pdf>. Running PRS can also help you identify which providers don't yet administer vaccines in their clinics.

³ [ACOG statement](#)

⁴ See https://www.dhcs.ca.gov/provgovpart/Pages/VBP_Measures_19.aspx

⁵ <https://www.ncqa.org/hedis/data-submission/>

Cc: Local health departments
Attachment (see below)

Attachment—DRAFT message for Medi-Cal managed care plans to tailor and send to their prenatal care provider network

Subject line: Help protect infants from whooping cough

Infants continue to fall ill, be hospitalized and [die](#) from pertussis and influenza in California. Prenatal Tdap and influenza immunization levels are significantly lower in women with Medi-Cal compared to privately insured, and we now have some new tools to help you address this disparity. Here are steps you can take.

1. *If your practice already stocks Tdap.* Through the new **Value Based Purchasing Incentive Program**, incentives are available to providers for each dose of Tdap administered to pregnant women in their offices. https://www.dhcs.ca.gov/provgovpart/Pages/VBP_Measures_19.aspx
2. *If your practice does not yet stock Tdap*
 - a. Contact the immunization coordinator of your [local jurisdiction](#) or Rebeca.Boyte@cdph.ca.gov to find out about **FREE state-funded Tdap doses** to help you get started.
 - b. In the meantime, make a [strong referral](#) and follow up to be sure your patients are vaccinated on time

More information

- for patients: see [CDC webpage for pregnant women](#)
- for providers: see State Immunization Branch [prenatal Tdap toolkit](#) as well as [the ACOG's immunization website](#)

^[1] [MIHA](#)

^[2] Running PRS can help you identify which providers stock or don't. For other examples of QI interventions, see [prenatal Tdap toolkit](#). For examples of Plan interventions, see: <http://www.partnershiphp.org/Providers/Quality/Pages/Perinatal-QIP-2018-19.aspx>
<http://www.immunizeca.org/wp-content/uploads/2018/04/Immunization-in-pregnancy-Robert-Moore-PHC.pdf>
<http://www.acphd.org/media/540904/best-practices-la-clinica-advice.pdf>

^[3] [ACOG statement](#)

^[4] See https://www.dhcs.ca.gov/provgovpart/Pages/VBP_Measures_19.aspx

^[5] <https://www.ncqa.org/hedis/data-submission/>